

# The National Building Bridges Initiative

MA Interagency Residential Provider Forum  
October 29, 2010  
Beth Caldwell, Caldwell Management Associates



2



## BBI History/Highlights

- **Began in November 2005**
- **National Steering Committee formed**
- **Three National Summits held (2006, 2007 & June 2010)**
- **BBI Joint Resolution developed at 2006 Summit (Identifies Core Principles)**

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

3



**BBI Core Principles**

- **Family Driven & Youth Guided Care**  
(primary focus to date)
- **Cultural & Linguistic Competence**
- **Clinical Excellence & Quality Standards**
- **Accessibility & Community Involvement**
- **Transition Planning & Services**  
(between settings & from youth to adulthood)

Advancing partnerships among residential and community-based service providers, youth and families to improve lives.

4




**BBI History/Highlights**

- **Workgroups:**
  - **Outcomes**
  - **Youth/Family Partnerships: 2 Advisory Groups: Family Advisory Network & Youth Advisory Group**
  - **Social Marketing**
  - **Fiscal/Policy**
  - **Cultural and Linguistic Competence**
- **Documents to support the field:**
  - **Joint Resolution**
  - **Matrix/Self Assessment Tool**
  - **Family & Youth Tip Sheets**

Advancing partnerships among residential and community-based service providers, youth and families to improve lives.

5




## BBI History/Highlights

- Articles in national publications (National Council for Community Behavioral Healthcare; Teaching-Family Association; CWLA Special Edition on Residential)
- State, City, County & Individual Program Initiatives
- A range of Partnerships: from funding Summits to endorsing Joint Resolution to full partnerships towards systems change
- Website launched 1/10: [www.buildingbridges4youth.org](http://www.buildingbridges4youth.org)

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

6



## Building Bridges Initiative Mission

Identify and promote practice and policy initiatives that will create strong and closely coordinated partnerships and collaborations between families, youth, community- and residentially-based treatment and service providers, advocates and policy makers to ensure that comprehensive services and supports are **family-driven, youth-guided, strength-based, culturally and linguistically competent, individualized, evidence and practice-informed, and consistent with the research on sustained positive outcomes.**

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

7




## Review of some of the Research

- Youth-guided: Courtney/Davis/ Clark/Jivanjee
  - National Technical Assistance Center for Youth Transition
  - National Institute of Health: *From Neurons to Neighborhoods, The Science of Early Childhood Development* (i.e. Choice)
  - Trauma Informed Care (NCTSN) (i.e. self-regulation)
  - SAMHSA's New Freedom Commission Report (i.e. recovery/resiliency - strengths)
  - Developmental Focus
- Family-driven: Burns/Hoagwood/Leichtman/Walters/Petr

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

8




## Importance of Family-driven Care

- Strongest predictor of post-transition success, after education, is support from family; 50% of youth who have aged out will live with some member of their family within a couple of years, about equally divided between parents and other relatives; (Courtney, M., 2007; Courtney, M., et al, 2004)
- “work with family issues and on facilitating community involvement while adolescents are in residential treatment” may have assisted these adolescents to maintain gains for as much as a year after discharge..” (Leichtman, M., et al, 2001)

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

9




## Importance of Family-driven Care

*"the effectiveness of services, no matter what they are, may hinge less on the particular type of service than on how, when, and why families or caregivers are engaged in the delivery of care. While traditional forms of care approached mental health treatment in a hierarchical top down approach (with the clinician maintaining some distance from the recipients of treatment), this approach is not reflected in newer forms of service delivery. It is becoming increasingly clear that family engagement is a key component not only of participation in care, but also in the effective implementation of it" (p. 238).*

(Burns, B. et al, 1999)

Advancing partnerships among residential and community-based service providers, youth and families to improve lives.

10




## Importance of Family-driven Care

- Residential-specific research shows improved outcomes with shorter lengths of stay, increased family involvement, and stability and support in the post-residential environment (Walters & Petr, 2008).

Advancing partnerships among residential and community-based service providers, youth and families to improve lives.

11



## Inconvenient Truths

1. We had not, as a field, connected practice to long-term outcomes
2. We had become inured to discrimination as evidenced in practices and language
3. We had not been introduced to an understanding of the role of trauma and loss in assessing why families may present challenging behaviors

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

12



## Small Steps and Total Transformations

- Some states, communities, residential programs taking small steps
- Some states, communities, residential programs taking large steps
- ALL STEPS WORTHWHILE

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

13



## Small Steps: Partnerships with Families

Raquel Hatter, CEO of large residential program, went back to her agency after the first BBI Summit and implemented multiple improvements, including:

- Primary focus on welcoming families as full partners
- Hired senior executive focused on family
- Rewrote job descriptions to include FDC
- Made supervisors accountable (some eventually asked to leave)

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

14



## Small Steps towards Family-driven Care

- Hire diverse family advocates (many)
- Families are Partners (24/7)
- Lose the words 'home-visits' (never earned – if necessary for safety reasons, staff go home with youth)
- Families serve in all staff capacities (e.g., executive team; trainers; all workgroups)
- Families have meaningful roles in program & staff evaluations
- Staff work in residential and COMMUNITY interchangeably
- For those rare events when home is not close to the program: Families called everyday, sometimes multiple X's daily to share child strengths/talk with child
- Strong ties between residential and family support groups IN THE COMMUNITY

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*



## Small Steps towards Family-driven Care

- Each program has an active Family Advisory Group with active and meaningful input into program practices
- Families are Partners (24/7) (IN EVERYTHING: call family member to celebrate an A on a spelling test; when a youth has a problem encourage them to call their family member to discuss)
- Family focus groups decide education offerings for families (always in community)
- All staff receive training on engaging families
- All pictures of youth in program include family members
- Programs identify strengths and interests of family members and frequently notice/support/engage family members around these strengths



*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*



## Small Steps towards Family-driven Care

- Families are offered choice in nearly everything program related – in essence, the staff are supporting the family in becoming strong decision makers
- Each program connects - prior to admission - and supports ongoing connections to home community: doctors/dentists; recreation (i.e. YMCA); spiritual connections; extended family members
- All group recreation trips involve family members (no more camping or 6-Flag trips with youth from program only)
- Promote relationships with siblings/cousins/friends
- Support for siblings available – preferably community locations
- Families encouraged/supported to bring their favorite dishes to community gatherings (e.g., picnics; pot lucks) with other families of youth from the program



*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*







## Small Steps towards Family-driven Care

- Residential program décor reflective of cultures/ethnicities of youth and families served and VERY WELCOMING
- Transportation provided for youth to and from home/community when families not able to provide
- All treatment team meetings (Child/Family Team or Family Group Conferencing PREFERRED) occur in the community at location family chooses (& date/time convenient to family)
- Staff understand and believe in a 'never give up approach' and work hard build trust with family
- Demeaning words "dysfunctional" are not used; specific challenges are identified, but focus is on identifying possible solutions
- **COMPASSION/EMPATHY/RESPECT IS EVIDENT WITH EVERY INTERACTION WITH EVERY FAMILY MEMBER**

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

18




## Small Steps towards Family-driven Care

Three of the most critical areas:

- Massive Leadership Focus on Transformation towards FDC
- Implement Family Finding/Family Search & Engage Practice to Fidelity
- Implement Child/Family Team (CFT)/Wraparound to Fidelity (same as community CFT)
  - Families choose, prior to child entering residential, extensive family/friend network that will be available to support the child
  - Family voice and choice is always top priority
  - Every family member has CHOICE of diverse advocates for ongoing support/advocacy
  - Program has practices/collaborations that ensure all family needs addressed (e.g., furniture; school clothes; help with rent)
  - Expert facilitators

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

19




## Those with your own children between 18- 30

**How many of you:**

- Have helped them financially during college?
- Have helped them financially since college?
- Have visited them in other parts of country/world?
- Have celebrated holidays, birthdays and other events with them?
- Have shared vacations/family reunions with them?
- Have been there for their hard times?
- Are really interested in their lives & STILL GIVE ADVICE & EMOTIONAL SUPPORT
- Have other family members and friends who still play a meaningful role in your older child's life?

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

20




## Importance of Youth-guided Care

- Engage youth fully in goal-setting, planning and decision-making
- Allow youth to make choices all of the time
- Deliver services and support in 'natural' settings – home, school, community, work
- Teach and apply skills where they will be used
- Balance between structuring for success and allowing youth to learn from mistakes
- For adolescents, embrace the developmental stage of emerging adulthood – not child, not adult

Courtney, M. (2007); Davis (undated); Davis Testimony (2004); TP Website

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

21




## Importance of Youth-guided Care

- Design practices to strengthen youth self-sufficiency
- New models consistent with shorter-lengths of stay
- Collaborate with other service providers in the child and adult systems
- Ensure strong support network throughout the transition years – not just until age 18 or 21
- Understand and be responsive to the youth's culture and beliefs
- Create opportunities for youth to use their experience for positive growth

Courtney, M. (2007); Davis (undated); Davis Testimony (2004); TP Website

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

22




## Importance of Youth-guided Care

*“By framing goals in ways that are about the young person’s future, the work automatically focuses on the positive, something hopeful, which yields more active engagement. Also, this future’s focus encourages an emphasis on youth strengths rather than deficits.”*

Rusty Clark, Director, National Center on Youth Transition

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

23




## Importance of Youth-guided Care

- **Staffing choices** that promote engagement
- Individualized mental health interventions that are **youth-friendly & innovative, assisting** youth/young adults in managing their conditions, engaging in social relationships, identifying life goals, and understanding their choices for achieving those goals
- Assessment/service planning processes that facilitate the identification of **individual strengths, talents**, and skills that can lead to education and career goals
- **Exposure to world of work & career options**, including **individualized support** by program staff to identify training, work-based experiences, & jobs that are most appropriate & rewarding for individual clients

Woolsey, L., et. al, 2008

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

24




## Importance of Youth-guided Care

- Treating young people as emerging adults.
- Partnering with youth in developing and implementing their individualized success plan.
- Individualizing planning focused on each young person's unique needs, strengths, and preferences.
- Believe in recovery – that young people will go on to lead productive lives.
- High expectations – belief that young people can be successful in careers, college, vocational training, and jobs of their choice.

(Jivanjee, P. et. al., 2008)

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

25




## Inconvenient Truths

1. We had not, as a field, connected practice to long-term outcomes
2. We had become inured to discrimination as evidenced in practices and language
3. We had not been introduced to an understanding of the role of trauma and loss in assessing why youth may present challenging behaviors

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

26




## Small Steps towards Partnerships with Youth

Richie Altman, Jewish Child Care Association (JCCA), NYS, reviewed his outcome data and decided to change practice and embrace youth-guided care:

- Annual strategic planning retreat (equal # youth/ staff)
- Youth-led planning conferences
- Staff dress code (union buy-in)
- Youth input for hiring staff
- Youth trained on TCI to participate in staff TCI training
- Youth part of JCCA's training faculty on issues of permanency
- Meaningful youth councils at all levels of agency

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

27




## Small Steps towards Youth-guided Care

- Youth provided training/support to lead own treatment team meetings
- Hiring of youth advocates (meaningful roles throughout the organization)
- Providing youth mentors
- Youth advisory group/Governing Body
- Providing leadership training for all youth
- Skill training imbedded everywhere
- Focus on joy, play, fun, gaining competence in extracurricular activities in youth's home community

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

28




## Small Steps towards Youth-guided Care

- Staff interactions are respectful, inquisitive and empowering – not directive/ authoritarian (i.e. more “How do you feel about that?” VS praise)
- Individualized approaches – not level or point systems (Mohr & Pumariega, 2004)
- Meaningful democratic processes (i.e. residential council led by youth)
- Interests/Activities occur in the community – not in program
- Group activities involve families (i.e. siblings/ cousins go roller skating with youth) (very little, if any, residential-based recreation or activities involving residential youth only)

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

29




## Small Steps: Building Bridges in New York

- Have held two statewide forums on Building Bridges
- Nine NYS Commissioners have committed to implementing goals of BB (BB language in Children's Plan)
- Developed Steering Committee to continue discussions and recommendations from the forums and to advance BB principles
- Supporting policy/fiscal flexibility in several counties (e.g., Onondaga; Erie) and two counties (Monroe; Westchester) have initiated specific BB initiatives; each of the counties are using Child/Family Team prior to, during and post-residential event, with goals to < LOS, > Family-driven & Youth-guided Care, & > collaboration between residential and community providers and advocacy/support groups

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

30



## Small Steps: Building Bridges in Westchester County, NY

Extensive research on innovative concepts and sites that have a successful system and a reduction on the reliance of long-term, out of home placement for children.

**New Residential Model**

- Short-term
- Close to child's home/community
- Outcome/Needs driven
- Least restrictive/use of lower-levels of care
- A resource within County's Service Array
- Careful review of all residential contracts to ensure commitment to practice and clarification of role in the system of care (monthly meetings)

**Early outcomes include:**

- Reduction in # of children entering residential care
- Earlier identification of children in placement who are ready for discharge and transitioning back into the community with supports
- Aftercare project reduced recidivism from 15% to 5%

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*



## Small Steps: Building Bridges in Pennsylvania

- Utilized the Family-driven Care (FDC) practices highlighted in the BB Joint Resolution to develop a “Best Practices” Bulletin to highlight and support intensive involvement of the family while the child is in a residential setting
- Setting expectations that all residential programs implement a range of FDC practices
- Developing new program descriptions/ expectations for all out-of-home care programs that incorporate FDC and Youth-guided Care

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*



## Small & Large Steps: Individualized Approaches

**Georgia, Florida, Indiana, Arizona, Kentucky, Alaska, Tennessee, West Virginia & others**

Examples of steps taken include:

- Using BBI documents to provide guidance to **residential and community providers**
- Holding statewide forums on BBI
- Rewriting regulation/licensing based on BBI principles/practices
- Developing BBI teams and developing plans for state-specific projects
- Revising fiscal strategies to support replication of BBI informed program models

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

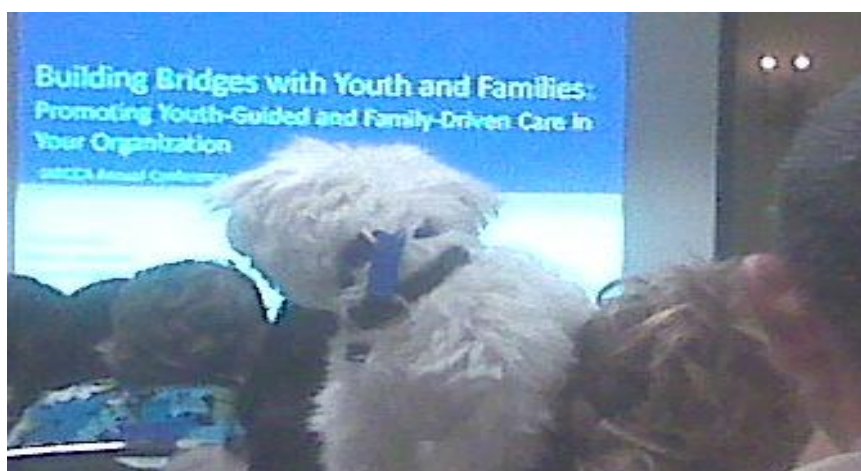




## Small Steps: Building Bridges in New York City


- NYS Office of Mental Health New York City-based staff went back from BBI Summit II and developed and implemented a plan to incorporate youth-guided practices into all community residential programs.
- Examples include: Youth advocates have been hired; youth have become part of staff hiring and evaluation; youth serve as co-trainers in staff training; practices stressing youth empowerment and leadership have been developed/implemented (e.g., youth have access to training as peer mentors; meaningful youth councils).

Advancing partnerships among residential and community-based service providers, youth and families to improve lives.



Advancing partnerships among residential and community-based service providers, youth and families to improve lives.

35




***“You never change things by fighting existing reality. To change something, build a new model that makes the old model obsolete.”***

*- Buckminster Fuller*

Advancing partnerships among residential and community-based service providers, youth and families to improve lives.

36



**Preliminary Summary of Top Reasons for Large Step Success**

- Family Conferencing or Child/Family Team
- Sustained Visionary Leadership
- Fiscal Creativity
- Fundamental Shift in Philosophy on how to View Family
- Trust in Partnerships
- Youth-guided Philosophy changes Practice
- **Strong CQI**

BBI Fiscal/Policy Group: Preliminary Summation from Successful Leaders who have Achieved Positive Outcomes (2010)

Advancing partnerships among residential and community-based service providers, youth and families to improve lives.



## Large Steps: NYC ACS (child welfare) Residential Care Services

- New waiver in NYS (B2H) expands waiver services to CW;
- ACS has been downsizing and moving toward neighborhood based residential for many years
- Ensures the following casework practices and services are available to youth in residential care:
  - Identification and involvement of permanency resources
  - Individualized assessment and treatment planning
  - Skills-building for caregivers
  - Frequent visiting
  - Child-specific services
  - Shortened lengths of stay
  - Aftercare
  - Residential respite
- **Note: In latest round moving primarily to Therapeutic Foster Care (closing SILP's, many group homes and residential beds)**



*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*



## Models ACS Identified

Two possible models are Four Oaks in Cedar Rapids, Iowa, and The Bridges in Atlanta, Georgia :

- recruitment of staff willing and eager to work in the family's home
- retraining of all staff in family-centered, strength-based practice
- extensive efforts to involve the family in daily treatment and therapeutic activities of their child in residential care, and careful tracking of the number of family contacts
- dealing with geographic distance by making a cottage available for overnight stays by parents and/or a behavior specialist driving the child home and then spending time at the home
- involving parents in developing treatment and behavior management plans and in participating in treatment conferences and family meetings, in person or by phone
- family therapy
- in-home aftercare
- brief residential respite



*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*





## Pre/During/Post Residential

	PRE-RESIDENTIAL INTERVENTION	DURING RESIDENTIAL	POST RESIDENTIAL
Traditional Residential Programming	* 5%	85% (About 95% of this time IN residential program – for school, activities, family ‘visits’)	10%
Transformed Residential Programming	10%	30% (About 85% of this time IN community – for school, activities, time with family & extended family)	60%
* Note: all %'s are estimates	*Note: %'s are used as examples/studies are emerging		




## BBI Work in Progress

- Fiscal/Policy: Identifying Barriers & Successful Strategies from around the country
- Strengthening Focus on Cultural & Linguistic Competence
- Expanding Marketing about BBI (i.e. paper on CW and BBI interface)
- Promoting/Improving SAT
- Developing Pilots/Seeking Funding to develop BBI program model and evaluate outcomes
- Developing Family/Youth successful engagement strategies (i.e. guides) for residential programs



Advancing partnerships among residential and community-based service providers, youth and families to improve lives.

41



## Critical elements

- Residential-specific research shows improved outcomes with shorter lengths of stay, increased family involvement, and stability and support in the post-residential environment (Walters & Petr, 2008).

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

42



## Steps to Become Involved in BBI

- Endorse the BBI Joint Resolution
- Join a BBI Workgroup
- Establish relationships and dialogue across all constituent groups in communities where your youth/families live (e.g., community-based providers, residential providers, advocates, family/youth support groups and policy makers).

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*



## Steps to Become Involved in BBI

- Develop protocols and practices to make entry into residential programs and the transition back to the community a seamless, supportive and coordinated process.
- Support the development of, and become active members of Child and Family Teams.
- Convene meetings and dialogues among constituencies to promote conversations about the national Building Bridges Initiative.

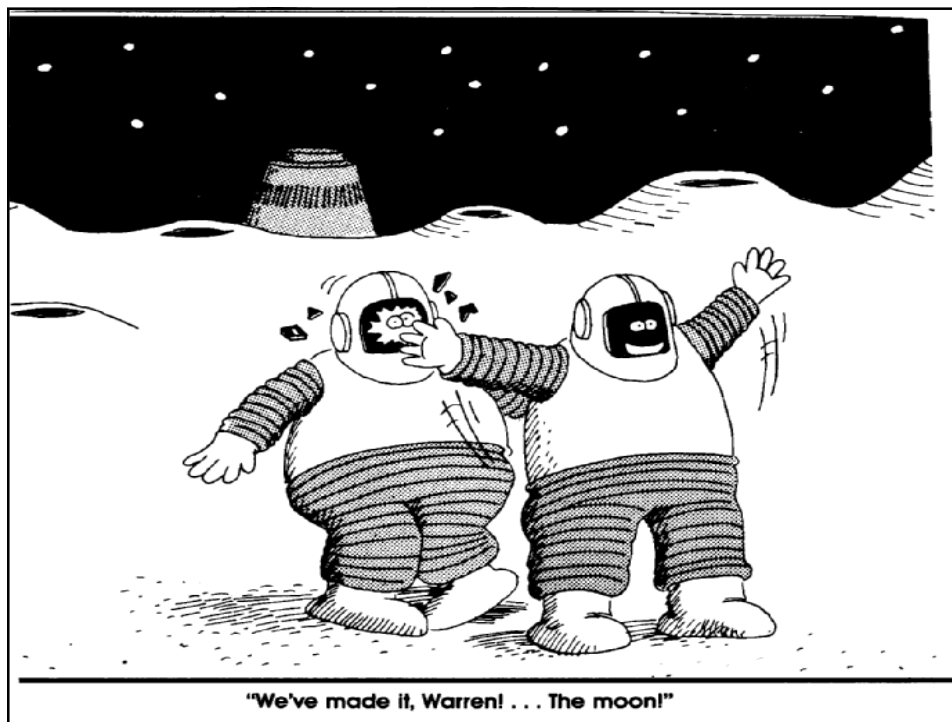
*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*




## Steps to Become Involved in BBI

- Support youth and families during their time in residential programs to continue to participate in home school, community-based programs and support services, recreational and medical activities, thereby facilitating timely and smooth transitions home.
- Continue to implement and strengthen trauma-informed, family driven, youth guided, culturally and linguistically competent and evidence-based practices.

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*





46




Building Bridges  
INITIATIVE  
Joining families, serving lives

## BBI Products & Resources

- **BBI website ([www.buildingbridges4youth.org](http://www.buildingbridges4youth.org)):** Please visit the website and review all of the BBI documents available to support work with children, youth and families.
- **BBI Self-Assessment Tool (SAT) and the SAT Glossary:** Residential programs, the youth and families they serve, and their community program counterparts now have a useful tool available to assess their current activities against best practices consistent with the BBI JR Principles.
  - The SAT: designed to be used with groups of residential and community staff, advocates, families and youth to facilitate discussion on how program and community efforts to implement best practices can be most effectively supported.
  - The SAT Glossary provides a definition of terms used throughout the SAT.
  - Will be available on the BBI website with additional information about how to use the SAT.

 Advancing partnerships among residential and community-based service providers, youth and families to improve lives 

47




## BBI Products & Resources

- **Family Tip Sheets - *Short and Long Versions*:** The BBI Family Advisory Network, comprised of family members and advocates who have had children in out-of-home care programs, have developed both short and long versions of the Family Tip Sheet.
- The Family Tip Sheets support family members by identifying important issues that family members might consider relative to their child's residential experience and information they may want to explore with their residential provider.
- It is recommended that both versions be distributed to family support/advocacy organizations; residential and community programs should also provide new and existing family members with copies of both documents.
- State and county policy makers and associations may want to distribute both versions of the Family Tip Sheet to programs they oversee or to their member organizations.

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

48




## BBI Products & Resources

- **Youth Tip Sheets - *Short and Long Versions*:** The BBI Youth Advisory Group has completed both short and long versions of the Youth Tip Sheet, entitled: ***Your Life – Your Future: Inside Info on Residential Programs from Youth Who Have Been There.*** The Youth Tip Sheets offer both words of support and a framework for guiding youth to ask questions that will help them be informed partners in their own care. Both the short and long versions of the Youth Tip Sheets can also be used as part of an admission packet.
  - **The Youth Tip Sheet – *Short Version*** is for youth who may be considering a residential program and/or those about to enter or who are already in a residential program. Ideally, a youth advocate or youth mentor would review the Youth Tip Sheet with the youth individually.
  - **The Youth Tip Sheet – *Long Version*** will interest youth who wish to gain a more in-depth understanding of how they can 'take charge' of their own treatment and recovery and can be used by advocates, providers, families and policy makers to ensure that residential and community programs serving youth, and their families, are truly youth-guided.

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*



49



## BBI Products & Resources

- **BBI Calendars of Events:** Over the past three years many national associations and organizations have highlighted different aspects of the BBI in conference keynote addresses, half- and full-day pre-Institute events and conference presentations. Listings of events where BBI will be highlighted are updated regularly on the BBI Calendar of Events, available on the BBI website.
- **Articles about BBI:** National publications have featured articles about BBI in their publications. Recent publications included the National Council for Community Behavioral Health, the national Teaching-Family Association, and the special issue of *Child Welfare* on residential care and treatment, the journal of the Child Welfare League of America.

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*

50



## BBI Contact Information

- Dr. Gary Blau  
[Gary.Blau@samhsa.hhs.gov](mailto:Gary.Blau@samhsa.hhs.gov)  
240-276-1921
- Beth Caldwell  
[bethcaldwell@roadrunner.com](mailto:bethcaldwell@roadrunner.com)  
413-644-9319

*Advancing partnerships among residential and community-based service providers, youth and families to improve lives.*